

BENEFIT

Published quarterly by the Group Insurance Commission for active and retired employees of the Commonwealth of Massachusetts

Argeo Paul Cellucci, Governor Jane Swift, Lieutenant Governor Deborah W. Heslop, Chairperson Dolores L. Mitchell, Executive Director

Summer 2000

Group Insurance Commission
Providing Massachusetts State
Employees, Retirees, and Their
Dependents with Access to
Quality Healthcare at a
Reasonable Cost

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www.state.ma.us/gic

Answers to Common Pharmacy Benefit Questions

What are the three tiers for copayments?

Most pharmacy plans will change their copayments as of July 1, 2000 to a three-tier structure. You will pay a higher copayment for certain drugs. See your GIC Benefit Decision Guide for the tier copayments by plan.

Generic: The least expensive copayment.

PREFERRED BRAND-NAME OR
FORMULARY: The second or
middle tier copayment. These
drugs are clinically equivalent to
the non-preferred brand-name
drugs in Tier 3, which have a
higher copayment
Non Preferred Brand or Non
FORMULARY: The third, and most
expensive tier.

How do I know which tier my prescription drug falls under?

Contact your health plan. Most plan web sites provide an outline by tier of popularly prescribed drugs. Or, contact your plan by phone. (Phone numbers and web sites are listed on page five.)

All GIC Pharmacy Program members (in the GIC Indemnity Plan and Commonwealth PPO Plan) who have



used prescription drugs that fall within the third tier, will receive a mailing in early June from Express Scripts. In it will be a formulary chart that you may take to your doctor to discuss other prescription drug options for your condition.

All GIC Pharmacy enrollees will receive a formulary chart in June with their new Express Scripts pharmacy card.

How can I keep my prescription drug costs down?

Don't be shy; discuss your prescription options with your doctor. Most doctors are very willing to discuss these issues with their patients. Ask whether an alternative, less expensive option would work for your condition. And, for prescription drugs you use on a long-term basis, mail order services provide both convenience and savings.

(Continued on page two)

Over 10,000 enrollees attended this year's GIC Health Fairs. See page seven for pictures.

GIC Pharmacy Program --Answers to Common Questions

(continued from page one)

I have a regularly prescribed medication through mail order at Merck-Medco, how do I transfer it to Express Scripts?

You do not need a new prescription from your doctor for any remaining refills. During the first week of July, Merck-Medco will electronically transfer all prescriptions to Express Scripts. To get your next refill, send your Merck-Medco refill slip to Express Scripts along with the required copayment.

Please continue to contact Merck-Medco with any questions about your coverage through June 30, 2000. For coverage beginning July 1, 2000, please contact Express Scripts at 1-877-828-9744, www.express-scripts.com.

Can I use the same retail pharmacy I've always used?

Most large pharmacy chains, such as CVS, Walgreen, Osco, Brooks and Stop & Shop, are included in the network. You will receive a network pharmacy list with your new prescription drug card in June.

How Can We Improve Annual Enrollment?

nnual Enrollment has drawn to a close, but we're already thinking about next year. How can we improve? What did you like about the Benefit Decision Guide? What's not useful? What additional information would you like to see? Did you like the Saturday health fairs? Did you use the HMO Report Card?

The GIC welcomes your feedback. We will include selected letters in our next newsletter. Or, submit a letter and request that we not reprint it. Please note that the GIC reserves the right to edit your comments for clarity and space considerations.

Send your suggestions to: Cynthia McGrath, Editor, For Your Benefit, Group Insurance Commission, P.O. Box 8747, Boston, MA 02114-8747.

Making the Most of Your Doctor Visit



hether you are seeing a new doctor, or haven't seen your doctor in a while, the following tips will help to ensure a productive visit. Preparation and communication are key factors in enhancing health outcomes.

Bring a list including:

- All physicians and specialists you are seeing including mental, dental, chiropractic, physical, or occupational health providers
- All prescribed and over-the-counter medications, vitamins, and alternative compounds — include dosage and frequency of each
- Allergies to medication and food
- Family medical history
- Past and present medical or psychological conditions

Communicate with your doctor:

- Any side effects of, or difficulties with, prescription drug medications
- If visiting because of an injury or pain, describe when and how the incident or symptoms began. If you are in pain, describe the location and whether it spreads to another region. Describe the quality of the pain. For example, is it sharp, dull or throbbing. Describe the pain's duration, what starts and alleviates or stops it, the time of day or night it's most pronounced, or other patterns.
- If coming in with a digestive or urinary complaint, advise your doctor of any changes in the frequency, consistency, or color of your feces or urine.
- Other medical concerns and questions
- Sexual issues and questions
- Alcohol and tobacco consumption
- Exposures to environmental toxic substances

GIC Identification Number

Active employees may use a number other than their Social Security Number for their GIC identification number. If you are an active employee and wish to have a different number, please request the change in writing along with your full name, address and Social Security number. Write to: Nancy Bolduc, Director of Operations, Group Insurance Commission, P.O. Box 8747, Boston, MA 02114-8747.

Why Should You Care About Alcoholism?

Do any of the following apply to you?

- 1) I ought to Cut down on drinking
- 2) People have <u>Annoyed</u> me by criticizing my drinking.
- 3) I have felt bad or Guilty about my drinking
- 4) I have had an <u>Eye</u>-opener in the morning, a drink first thing in the morning to steady my nerves or get rid of a hangover.

This CAGE questionnaire for screening of alcohol abuse (including beer, wine and other hard liquor) was printed in the Journal of the American Medical Association. Its interpretation: Four affirmative responses are definitive of alcoholism. More than two affirmative responses indicate problem drinking or possible alcoholism.

If these apply to you, seek intervention before your condition escalates. Short-term effects of alcoholism include:

- Slowed reaction time
- Blurred vision
- Depression
- Nausea
- Loss of judgment and inhibitions which can lead to doing something you would not normally do such as driving

while impaired, inappropriate or dangerous behaviors

Long-term risks include:

- Nutritional deficiencies
- Brain and nervous disorders
- Digestive damage
- · Liver damage
- Immune system disorders
- · Heart disease, stroke, and heart attack
- Blood pressure disorders and other circulatory damage
- High risk for central nervous system damage to fetuses of pregnant women who drink



All GIC plans offer substance abuse treatment benefits. For HMO plan benefit details, refer to your GIC Benefit Decision Guide or call your HMO. Your Primary Care

Physician can provide you with a referral. If you are a GIC Indemnity Plan or Commonwealth PPO member, contact United Behavioral Health directly. See page 5 in this newsletter for phone number and web site information.

GIC Q & A

Q) What's the relationship between the GIC and the GIC Indemnity Plan?

A) The Group Insurance Commission (GIC) is the state agency established in 1955 by the Legislature to provide health, life and other benefits to state employees, retirees, and their dependents.

The GIC Indemnity Plan is one of the health plans available to GIC enrollees. With this plan, providers or enrollees are reimbursed for health care expenses. Because there is only one indemnity plan, it is called the GIC Indemnity Plan. UniCare is the administrator of this plan. Enrollees should call

UniCare at the phone number on page five for questions about the plan, coverage, or for prenotification of hospital admissions or certain outpatient procedures. Q) Please explain the major similarities and differences between the GIC Indemnity Plan PLUS and The Commonwealth PPO Plan.

A) Both plans have their own network of providers, including doctors, hospitals, visiting nurse associations, labs and other facilities, primarily based in Massachusetts. With either plan you can obtain out-of-network care, but your costs will be higher. Both plans include an Enrollee Assistance Program and Mental Health and Substance Abuse programs through United Behavioral Health. The GIC Indemnity Plan PLUS and Commonwealth PPO also have the same pharmacy benefit program. The GIC Indemnity Plan PLUS is administered by UniCare. Tufts Health Plan administers the Commonwealth PPO. With the PPO, you must select a Primary Care Physician (PCP) who will provide necessary referrals for other services as needed. There are no PCP selection requirements with the GIC Indemnity Plan PLUS. There are minor differences in monthly premiums and hospital deductibles between the two plans.

Many State Employees Unprepared for Risk of Inability to Work

If you are in an accident or become ill and cannot earn a paycheck, how will you pay your mortgage, car payment, utilities, and living expenses? Most Americans are financially prepared for death, but they have not prepared for the possibility of not being able to work. Yet, the probability of becoming disabled and unable to work between the ages of 35 and 65 is significantly higher than dying.

Disability strikes one in four workers before age 65. The financial repercussions of disability can be disastrous. According to the US Department of Housing and Urban Development, 46% of conventional mortgage foreclosures were attributed to disability and only 2% to death.

Active state employees enroll in long-term-disability (LTD) insurance at a lower rate than national averages: only 32% participate compared with the national average of 35%. However, unlike most Americans, State employees have the opportunity to obtain LTD insurance at an attractive rate. LTD replaces up to 50% of your regular pay on a tax free basis to a maximum monthly benefit payment of \$10,000. It begins after you have been totally disabled for 90 consecutive days.

All active employees who work half-time or more are eligible to apply at any time. And, if you did not enroll in LTD coverage when you began your employment with the Commonwealth, you will need

to complete a Personal Health Statement that must be approved by Hartford Life before coverage can begin.

The cost for LTD coverage depends on your pay and your age. Rates are guaranteed through June 30, 2002.

<u>LTD RATES</u>		
	Monthly premium	
	per \$100	
Employee age	<u>of monthly earnings</u>	
Under 40	.23	
40-44	.46	
45-49	.68	
50-54	1.08	
55-59	1.44	
60-64	1.08	
65-69	0.48	
70+	0.27	



The GIC's LTD benefit makes sense AND is affordable! See your GIC Coordinator for more information and an LTD enrollment application.

Managers and Supervisors – Need Help With Employee Problems?

If you are a manager or supervisor and need help with any of the following issues, assistance is available. The Commonwealth offers Employee Assistance Program (EAP) benefits as a resource to all agencies at no cost to the individual agency. Whether you need assistance with managing problem employees, or stress management seminars, help is available. The EAP Coordinator at United Behavioral Health can provide confidential consultations and resource recommendations for dealing with touchy subjects such as:

- Disgruntled employees
- Gossip problems
- Inappropriate or abusive behavior
- · Hygiene issues
- Mental illness
- Potential violence
- Substance abuse
- Eating disorders

Contact Sue Cooper at UBH to access EAP benefits for your agency employees: 781-768-2277.

L etters to the Editor

"I think when you mail out propaganda like we promote preventive medicine, it is a blatant lie...When my husband wanted to take advantage of a cardiac rehab program, he was told "you'd need to come to Mass" – a man with a quad(ruple) bypass and suffered a MCI (Mass Cardiac Infarction). Hello. I'm fed up with the GIC."

Frustratedly, J.C., Kennebunkport, Maine

Editor's Note: Indemnity plan members can use providers anywhere in the U.S. Unfortunately, for regulatory and quality assurance purposes, most disease management programs are only available in Massachusetts, where over 90% of our enrollees reside.

"Your spring article, *Open your Mouth for Clues to Your Health*, was a slap in the face to Massachusetts State Retirees, who collectively, have no state dental coverage. Your article was disingenuous to poor Massachusetts State Retirees, who as you know, have no dental coverage."

Sincerely, B.B., Yarmouth Port, Massachusetts

Editor's Note: Although the GIC wrote this article solely as an informational piece, we sympathize with your plight. The GIC is not legally authorized to offer a dental plan for its retirees at this time. Legislation is pending authorizing the GIC to study the feasibility of a retiree pay all dental plan. Residents can voice their opinion on this legislation, or any pending legislation, by contacting their State Representatives and Senators.

"Recently Leona Dwoske, a Customer Service Representative for the GIC Indemnity Plan, not only provided superior customer service, she saved an enrollee's life. Leona received a call requesting benefit information for oxygen...the gentleman advised her he hadn't been able to (contact his doctor) and that he was having a very difficult time breathing. Due to her concern regarding the gentleman's condition, Leona made an attempt to contact 911 of Springfield, where the member was, but was told it was out of their jurisdiction. She contacted the Andover Police Department (where she was located) to seek assistance. They were able to contact BayState Medical Center who sent an ambulance to the gentleman's home. Leona received a call from the gentleman to express his gratitude for her perseverance and for saving his life. He told her he owed her his life and that although he only has a few months to live, the only thing he wants is to see his great grandchildren before he dies. Because of her he will."

Julie Augustine, Manager, Customer Service, UNICARE

Benefits Access



GIC Indemnity Plan,	1-800-442-9300	
GIC Indemnity Plan PLUS, Indemnity OME	www.plusaccess.com	
Commonwealth PPO	1-800-870-9488	
(Tufts)	www.tufts-healthplan.com	
I————	<u> </u>	
CIGNA HealthCare,	1-800-244-1870	
CIGNA CentralCare	www.cigna.com	
Fallon Community	1-800-868-5200	
Health Plan, Fallon Senior Plan Preferred	www.fchp.org	
Harvard Pilgrim Health	1-800-542-1499	
Care, GIC Retiree Plan	www.harvardpilgrim.org	
First Seniority	1-800-238-6420	
Health New England,	1-800-842-4464	
Health New England	www.healthnewengland.com	
Medrate		
ı—————————————————————————————————————	1-800-433-5556	
ı	www.nhp.org	
Tufts Health Plan, Tufts	1-800-462-0224	
Medicare Complement,	www.tufts-healthplan.com	
Tufts Secure Horizons	1-800-246-2400	
. United Behavioral Health	1-888-610-9039	
	www.unitedbehavioralhealth.com	
Prescription Drugs	1-800-988-1795	
(through 6/30/00)	www.merck-medco.com	
Proposintian Drugo	4 077 000 0744	
Prescription Drugs (beginning 7/1/00)	1-877-828-9744	
	www.express-scripts.com	
The Hartford	1-800-322-6222	
(LTD Insurance)	Notavailable	
I Medicare	1-800-633-4227	
ı <i>Medicare</i> ı	www.medicare.gov	
State Retirement Board	1-617-367-7770	
	www.state.ma.us/treasury/srb.htm	
Group Insurance	1-617-727-2310	
Commission	www.state.ma.us/gic	
TDD/TTY Access	1-617-227-8583	
Popofite Only for Stoff in Logicleture		
Benefits Only for Staff in Legislature,		

 Delta Dental
 1-800-553-6277 www.deltamass.com

 SightCare
 1-800-595-9881

Executive Offices, and Managers

For Your Benefit is published quarterly by the Massachusetts Group Insurance Commission Dolores L. Mitchell, Executive Director Cynthia McGrath, Editor

Your Health

.....and Chlamydia

id you know that chlamydia is the most common bacterial sexually transmitted disease in America? More than four million new cases of chlamydia occur in the U.S. each year. It primarily strikes adolescents and young adults; 1 in 10 adolescent girls are infected. However, approximately 75% of women and 50% of men who have chlamydia may not know they have the disease as they have few or no symptoms. Chlamydia can be transmitted through any type of sexual contact with an infected partner.

Without treatment, 20 to 40 percent of women with chlamydia develop pelvic inflammatory disease. PID can cause chronic pelvic pain and can permanently damage fallopian tubes. Up to thirty percent of infertility is attributable to complications of PID. If not treated in men, chlamydia can lead to urethritis, an infection that causes pain and difficulty urinating. Men are also at risk for infertility.



Get the Help You Need

The National Center for Quality Assurance (NCQA) recommends that all sexually active 15 to 25 year old women be screened regularly for chlamydia in order to reduce the incidence of PID. See your doctor if you have symptoms such as abnormal discharge or pain during urination. Be frank with your doctor about your sexual history, and follow his or her advice.

Timely Treatment Makes a Difference

The sooner you receive treatment for chlamydia, the faster you reduce your chances for complications. Your doctor will prescribe antibiotics. As with all antibiotics, you need to take all the prescribed medications until they are used up, even after symptoms disappear.

Health Research Reaps Benefits

Startling news about the number of hospital-based errors leading to preventable deaths was recently splashed across the news. The National Institute of Medicine reported that up to 98 thousand people die each year in the U.S. as the result of preventable hospital-based medical errors.

How did the Institute of Medicine learn about the magnitude of this problem and how will hospitals and other providers devise effective solutions? The answer is through careful medical research, using very large data bases, so that patterns can be found that are valid for very large populations. Using anonymous data, researchers study claims or hospital records to uncover patters and find areas for improvement. These include:

- Improved safety
- New and enhanced health management programs
- New benefits
- · Reduced medical costs

The GIC's recently enhanced mental health parity benefit – expanding mental health coverage across all plans to equal other medical benefits — is a prime example of some of the payoffs of research. Our plans' Coronary Artery Disease and UniCare's diabetes management programs also came about as the result of research. These initiatives have improved enrollees' quality of life.

The bottom line – legitimate medical research that protects individuals privacy is paramount to everyone's health.

GIC Heal th Fairs 2000



A representative from Harvard Pilgrim Health Care checks an enrollee's blood pressure.



Representative Harriette L. Chandler (left) (D-Worcester) talks with GIC Executive Director, Dolores L. Mitchell



Even the youngest came out for the GIC Health Fair at the Hampden County Sheriff's Department.



The Hampden County Sheriff's Department offered face painting for children attending the health fair.



The GIC's Judy Settana (left) assists Governor's Councilor Kelly A. Timilty.



The GIC table was accessible to the Legislature.



The third floor of the State House was a busy place on Wednesday, April 26.



Harvard Pilgrim Health Carés Paula Piaggio (right) answers a question from Representative Cele Hahn (R-Westfield).



Shawn Duhamel (right), Legislative Liaison of the Retired State, County, and Municipal Employees Association of Massachusetts, makes a point with Ralph White (left), President of the Association, and Dolores L. Mitchell (center) Executive Director of the Group Insurance Commission.



GIC Commissioner, Chrystene L. Zarazinski, Council 93, AFSCME, AFL-CIO (left) takes a look at a rate sheet with an enrollee.

KEEP IN MIND...

PLEASE REMEMBER TO NOTIFY THE GIC IF YOU:

- Ö Have a baby
- Ö Add dependents or spouse
- Ö Get divorced
- Ö Move

Active employees must notify the Group Insurance Coordinator where they work of family changes. Retirees must call their health plan and notify the GIC in writing.

DEPENDENT COVERAGE

Unmarried dependent coverage ends at the end of the month the dependent turns 19. If the dependent is a full-time student, the State insured must apply to the GIC for student coverage and, if approved, must recertify student eligibility twice a year.

For additional information, call the Group Insurance Commission 617-727-2310 extension 801. BEFORE YOU RETIRE

Three months before you retire from state service, be sure to do the following:

- 1) For retirement counseling, call or visit the State Retirement Board at 617-367-7770, One Ashburton Place in Boston. See their web site at www.state.ma.us/treasury/srb.htm.
- 2) Evaluate your health and optional life insurance options. Complete and submit the corresponding GIC forms available through your worksite's GIC Coordinator.
- 3) Call or visit your local Social Security Office (see phone book blue pages, or go to www.ssa.gov) for Social Security & Medicare Benefits eligibility. Fill out and submit the forms.

This will help ensure seamless health, life insurance, and retirement benefits until your retirement is approved.

This publication has been approved by State Purchasing Agent Philmore Anderson III

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Assistance for Employee Problems?

- ➤ Managers and Supervisors -- Need Help or
- ➤ Many State Employees Unprepared for Disability
 - ➤ Why Should You Care About Alcoholism?
 - ➤ Making the Most of Your Doctor Visit
- ➤ Answers to Common Pharmacy Benefit Questions

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